

# Public Document Pack

**Becky Shaw**  
Chief Executive

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15 February 2021

## Cabinet

A virtual meeting of the Cabinet will be held at **10.30 am** on **Tuesday, 23 February 2021**.

**Becky Shaw**  
Chief Executive

**Note:** In accordance with regulations in response to the current public health emergency, this meeting will be held virtually with members in remote attendance. Public access is via webcasting.

**The meeting will be available to watch live via the Internet at this address:**

<http://www.westsussex.public-i.tv/core/portal/home>

## Agenda

- 10.30 am    1.    **Declarations of Interest**
- Members and officers must declare any pecuniary or personal interest in any business on the agenda. They should also make declarations at any stage such an interest becomes apparent during the meeting. Consideration should be given to leaving the meeting if the nature of the interest warrants it. If in doubt please contact Democratic Services before the meeting.
- 10.35 am    2.    **Minutes** (Pages 3 - 8)
- Cabinet Members are asked to agree the minutes of the meeting held on 22 January 2021 (cream paper).
- 10.40 am    3.    **Urgent Matters**
- Items not on the agenda which the Chairman of the meeting is of the opinion should be considered as a matter of urgency by reason of special circumstances.
- 10.45 am    4.    **Covid-19 Pandemic Update** (Pages 9 - 26)
- The Cabinet is asked to consider and comment on the Covid-19 Pandemic update report and in particular those areas relevant

to their portfolio.

Other members in attendance including scrutiny chairmen and the minority group leaders may be invited to comment on the report.

Cabinet Members may respond to comments made and the Leader may sum up the discussion. No decision is required.

11.25 am 5. **Consultation on Early Help Service Redesign (CAB17\_20/21)** (Pages 27 - 58)

The Cabinet is asked to approve the plans for consultation from early March 2021 on the proposals for the Early Help service for future decision after the conclusion of the consultation.

The Cabinet Member for Children and Young People will introduce the report.

The Chairman of the Children and Young People's Services Scrutiny Committee will be invited to speak for up to three minutes to provide the views of the Committee on the report.

Each of the main minority group leaders will be invited to speak for up to three minutes each on the report.

The Cabinet will then discuss the report and proposals prior to taking its decision.

11.55 am 6. **Emerging Issues**

Cabinet Members are invited to provide any verbal updates on current significant issues for their respective portfolios which may benefit from discussion.

12.00 pm 7. **Date of Next Meeting**

The next meeting of the Cabinet will be held on 23 March 2021.

**To all members of the Cabinet**

## **Cabinet**

22 January 2021 – At a virtual meeting of the Committee held at 10.30am with restricted public access.

Present:

Cllr Marshall (Chairman), Cllr Crow, Cllr Elkins, Cllr Hunt, Cllr A Jupp, Cllr N Jupp, Cllr Lanzer, Cllr Russell and Cllr Urquhart

Also in attendance: Cllr Barrett-Miles, Cllr J Dennis, Cllr Hillier, Cllr M Jones, Cllr Turner, Cllr Waight and Cllr Walsh

### **Part I**

#### **59. Declarations of Interest**

59.1 No declarations of interest were declared.

#### **60. Minutes**

60.1 Resolved – that the minutes of the meeting held on 15 December be approved as a correct record and that they be signed by the Chairman.

#### **61. Exceptional Pressures Update**

61.1 Cabinet considered a report by the Chief Executive, Becky Shaw who advised that work continued across the authority and with partners to support residents, communities and businesses.

61.2 Dr Tony Hill, Interim Director of Public Health highlighted the fast pace of the Covid-19 situation and provided the most recent case figures and incidence rates for the County over the last few weeks. He advised that the NHS had lead responsibility for the vaccination programme, supply and demand was a pressure but that just over 50% of West Sussex care home residents had been vaccinated, with more supplies due.

61.3 Lucy Butler, Executive Director for Children, Young People and Learning advised that staffing levels in Children's Social Care were stable, with some face to face visits to children taking place. Whilst some learning bubbles and Early Years settings had closed, school attendance was at or above regional averages. She reported that schools remained concerned about re-opening. School meals for those eligible would be covered in February half term and provision was currently being looked at for Easter, Summer and Christmas.

- 61.4 Keith Hinkley, Executive Director of Adults Social Care referred to significant challenges for the NHS and social care. To mitigate the impact of discharges from hospital care, a broader range of services was being commissioned. 70 care homes were currently closed to new admissions. Services were being directed to critical parts of the system to help reduce pressure and challenges.
- 61.5 Chairmen of the scrutiny committees gave thanks to staff for their ongoing work amidst the pandemic and for continuing to provide and support critical services for residents under these difficult circumstances.
- 61.6 Cllr Dr James Walsh, Leader of the Liberal Democrat Group commented on the NHS vaccination programme and the delivery to vulnerable groups. Cllr Michael Jones, Leader of the Labour Group raised the need for a mass vaccination site in Sussex and for suitable IT for home learning pupils.
- 61.7 The Cabinet Member for Fire and Rescue and Communities, Cllr Duncan Crow, advised of the support provided to those required to shield from the community hubs including helping households with food. The Cabinet Member for Environment, Cllr Deborah Urquhart, asked about support for the NHS vaccination work. She asked whether the Local Tracing Partnership (LTP) could track residents who had not attended for vaccination. Dr Tony Hill responded to these questions and those from others.
- 61.8 Resolved – that Cabinet notes the update and discussion.

## **62. West Sussex Plan Reset (CAB14\_20/21)**

- 62.1 Cabinet considered a report by the Chief Executive, Becky Shaw. The report was introduced by the Leader who advised it was the latest iteration of the new corporate plan for WSCC. The plan now included detailed delivery outcomes and performance indicators to enable to focus and resources on the priorities.
- 62.2 Chairmen of the Health and Adults Social Care, Environment and Communities, Performance and Finance and Fire and Rescue Service Scrutiny Committees noted their Committee's recent deliberations of the Key Performance Indicators (KPIs) in the plan and their overall satisfaction and support of them relative to their areas of business.
- 62.3 Cllr Dr James Walsh, Leader of the Liberal Democrat Group felt there was a disconnect in the Reset plan from its aspirations and the Revenue Budget proposals. Cllr Michael Jones, Leader of the Labour Group felt that KPIs in the past had not recognised challenges in the Children's or Fire and Rescue Services and therefore had some reservations.

62.4 Becky Shaw, Chief Executive explained the plan was intended as a starting place; that detailed action plans would develop and evolve over time for each department. These business plans would underpin the KPIs and encourage new ones. She advised the plan would return to Cabinet on a quarterly basis, and annually to County Council alongside the Revenue Budget. Cabinet Members commented on the KPIs and respective relevance to the work of their portfolios, particularly in the areas of economy, adults and health and children's social care. The Leader advised although WSCC had faced a number of challenges, work in all areas had been significant with good achievements recognised from external partners. Whilst the authority remained on a journey, which was overlaid with the pandemic, impact would be minimised by continuing to work with partners, resetting priorities and delivering good outcomes for residents.

62.5 Resolved – that Cabinet approves the Reset Plan and supporting documents for further consideration by the County Council at its February 2021 meeting, subject to amendments to KPI 22 and KPI 45 as follows:

KPI 22 – Equivalent tonnes (te) of CO<sub>2</sub> emissions from WSCC activities (CC)

Baseline – changed from 13,492 to 33,912CO<sub>2</sub>te

2021/22 – changed from 13,000 to 30,521CO<sub>2</sub>te

2022/23 - changed from 12,000 to 29,910CO<sub>2</sub>te

2023/24 – changed from 11,000 to 28,116CO<sub>2</sub>te

2024/25 – changed from 10,000 to 25,867CO<sub>2</sub>te

KPI 45 – Changed to – All member training and development needs identified and training completed within 12 months of 2021 election (future year targets and measures to be set by the Member Development Group)

Baseline – no change

2021/22 – changed from within six months of the 2021 elections to 100%

2022/23 – changed from N/A to To be confirmed (TBC)

2023/24 – changed from N/A to TBC

2024/25 – changed from N/A to TBC

### **63. Revenue Budget 2021/22 and Capital Programme 2021/22-2025/26 (CAB15\_20/21)**

- 63.1 Cabinet considered a report by the Director of Finance and Support Services. The report was introduced by the Cabinet Member for Finance, Cllr Jeremy Hunt, who outlined the report's detail regarding possible future financial risks and the council's ability to deal with those, proposals for a balanced budget, the importance of maintaining healthy reserves and the announcement of additional funding from the Government which enabled the removal or deferral of some savings options. The budget proposed to increase the core council tax rate by 1.99% and the adults' social care precept by 3%.
- 63.2 Chairmen of the Performance and Finance, Fire and Rescue Service and Environment and Communities Scrutiny Committees commented on the Revenue Budget report noting that looking to the future was key.
- 63.3 Cllr Dr James Walsh, Leader of the Liberal Democrat Group was concerned about the savings affecting the Early Help service. Cllr Michael Jones, Leader of the Labour Group welcomed the removal of some of the savings proposals but felt this was a reprieve only. Cllr Jones was concerned about cuts to the public health budget, particularly for those residents who don't qualify for additional support under the Care Act. He made further comments regarding the proposals for Early Years funding and adults' social care.
- 63.4 Cabinet Members made the following comments in relation to the Revenue Budget and Capital Programme:
- Significant capital projects for schools were highlighted within the Capital Programme.
  - A consultation on the removal of the Community Initiative Fund had taken place with all members and was supported in the main.
  - Investment to become carbon neutral and on renewable energy was crucial to fulfil the ambitions of the Climate Change Strategy.
  - The Ash Dieback issue would be addressed, with around 40,000 trees likely to be affected.
  - The Public Health Grant was fixed and would be used in ways to be most effective.
  - Children's Services continued on its improvement journey with investment in key services.
  - The council maintained its commitments against the backdrop of the pandemic to provide as much support as possible to residents and communities.
- 63.5 Resolved – that Cabinet endorses the County Council Budget for 2021/22, as set out in Appendix A and Annex 1, the Capital Strategy set out in Annex 2(a) and the Treasury Management Statement set out in Annex 2(b), for approval by County Council on 12 February 2021.

#### **64. Local House Project for Care Leavers (CAB16\_20/21)**

- 64.1 Cabinet considered a report by the Executive Director of Children, Young People and Learning. The report was introduced by the Cabinet Member for Children and Young People, Cllr Jacquie Russell, who highlighted the identified need for a secure housing pathway for young people leaving care.
- 64.2 The Chairman of the Children and Young Peoples Services Scrutiny Committee, Cllr Stephen Hillier advised the Committee was in full support of the project as it provided stability for care leavers who might otherwise find independence a challenge.
- 64.3 Cllr Dr James Walsh, Leader of the Liberal Democrat Group, and Cllr Michael Jones, Leader of the Labour Group both welcomed the project and hoped it would be a success to build upon.
- 64.4 Resolved – that Cabinet approves the implementation of a Local House Project in West Sussex in order to deliver the savings outlined in the report.

## **65. Emerging Issues**

- 65.1 The Cabinet Member for Fire and Rescue and Communities, Cllr Duncan Crow, advised of the positive report received from Her Majesty's Inspectorate of Constabulary and Fire and Rescue Services (HMICFRS) relating to how the service had adapted and responded to the Covid-19 pandemic. The following key points were highlighted:
- Staff wellbeing was a clear priority.
  - New ways of working had been introduced.
  - The service had continued to support the most vulnerable through prevention and protection.
  - The service was praised for its work with other organisations.
- 65.2 The Cabinet Member for Fire and Rescue and Communities, Cllr Duncan Crow, Chairman of the Fire and Rescue Service Scrutiny Committee, Cllr, Steve Waight, and Chief Fire Officer, Sabrina Cohen-Hatton noted the progress made in the service and gave thanks to staff.
- 65.3 The Cabinet Member for Adults and Health, Cllr Amanda Jupp, advised that a permanent appointment had been made to the position of Director of Public Health, and that Alison Challenger would join the authority in April.

## **66. Date of Next Meeting**

- 66.1 The next meeting of the Cabinet will be held on 23 February 2021.

The meeting ended at 1.18 pm

Agenda Item 2

Chairman



**Key decision: No  
Unrestricted  
Ref: Not applicable**

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## **Report to Cabinet**

**February 2021**

**COVID-19 Pandemic: update**

**Report by the Chief Executive**

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### **Summary**

West Sussex County Council continues to respond to the ongoing disruption caused by the COVID-19 Pandemic.

Attached at Appendix A is the latest priority update on our response. The Appendix provides information on cases in West Sussex, the local tracing partnership, schools, care homes and other priority issues.

West Sussex County Council is ensuring the ongoing COVID-19 response is managed in an integrated way with the other challenges potentially facing the authority and its partners over the next few months. A verbal update will be provided at the meeting to ensure an up-to-date picture is provided given the fast-moving nature of current events. The pressures on the services, especially adults and schools, are significant, cumulative and growing. We are working through our emergency planning and management structures to ensure we are always focussed on the highest priority activities.

The resource implications of the COVID-19 emergency response continue to be assessed. There are significant risk implications. Decisions required to address COVID-19 include assessments in accordance with Council policy and the statutory framework of duties and responsibilities including those relating to Equality, Human Rights, Social Value, Sustainability and Crime and Disorder Reduction implications.

### **Recommendation**

Cabinet will be asked to consider and comment on the Council's response to the COVID-19 Pandemic.

Becky Shaw

**Chief Executive**

### **Appendices:**

Appendix A – COVID-19 Pandemic Report

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**WEST SUSSEX COUNTY COUNCIL COVID-19 PANDEMIC BRIEFING  
FEBRUARY 2021**

**Priority issues**

- a) National and Local Outbreak Management (paras 1 - 21)**
- b) Clinically Extremely Vulnerable and Community Hub update (paras 22 - 44)**
- c) Children, Young People and Learning - update (paras 45 - 64)**
- d) Care Homes update (paras 65 - 84)**

## A) National and Local Outbreak Management

### West Sussex Data

1. **Scale** – between January 31st to February 6th, – across the county overall there were 1,384 cases, on average 198 positive cases a day. In the previous 7-day period there were 2,167 cases, and average of approximately 310 cases per day.
2. The **seven-day incidence rate** varies among the districts and boroughs:
  - Over the period January 31st to February 6th, Crawley had the highest rate at 255.3 per 100,000 population, Mid Sussex the lowest rate at 90.7 per 100,000.

	<b>Cases</b> between January 31st to February 6th	<b>Rate per 100,000</b>	<b>Rate per 100,000 (60+ years)</b>
Adur	75	116.6	84.5
Arun	330	205.3	128.0
Chichester	205	169.2	227.9
Crawley	287	255.3	218.6
Horsham	191	132.8	126.5
Mid Sussex	137	90.7	90.6
Worthing	159	143.8	120.8
<b>West Sussex</b>	<b>1,384</b>	<b>160.2</b>	<b>141.8</b>
South East	13,826	155.2	128.8
England	109,543	194.6	151.0

- Overall, the county rate was 160.2 per 100,000, back to the rate observed in mid-December. The rate for the South East region was 155.2 per 100,000 and for England the rate was per 194.6 per 100,000.
- The rate of cases for people aged 60+ ranged from 227.9 per 100,000 in Chichester down to 84.5 per 100,000 in Adur; the overall West Sussex rate is 141.8 per 100,000 population. The regional rate is 128.8 per 100,000 and the England rate 151.0 per 100,000.

3. **Positivity Rates** – For the period January 31st to February 6th, Crawley had the highest positivity rate in West Sussex; at 9.7% this has fallen considerably in recent weeks from a high of approx 25%.

Area	Positivity Rate (weekly percentage of individuals tested who test positive)
Adur	4.9
Arun	6.2
Chichester	6.4
Crawley	9.7
Horsham	5.3
Mid Sussex	3.4
Worthing	4.5
<b>South East</b>	5.7
<b>England</b>	7.4

4. **Hospital Activity** - The national Coronavirus dashboard (link below) includes information at individual NHS Trust level. <https://coronavirus.data.gov.uk/>

Note: The national dashboard is still showing figures as at 2<sup>nd</sup> February. Locally we have access to more recent data, these are shown below but should be treated as provisional.

5. Pressure on hospitals remains high but it is falling. Overall numbers of COVID-19 patients are reducing but remain over 10% of all inpatients. The (expanded) ITU/HDU usage is high, and is more sluggish in declining.

As reported on **11<sup>th</sup> February**:

*COVID-19 patients currently in hospital*

Brighton and Sussex University Hospitals NHS Trust	111
Surrey and Sussex Healthcare NHS Trust	117
Western Sussex Hospitals NHS Foundation Trust	133

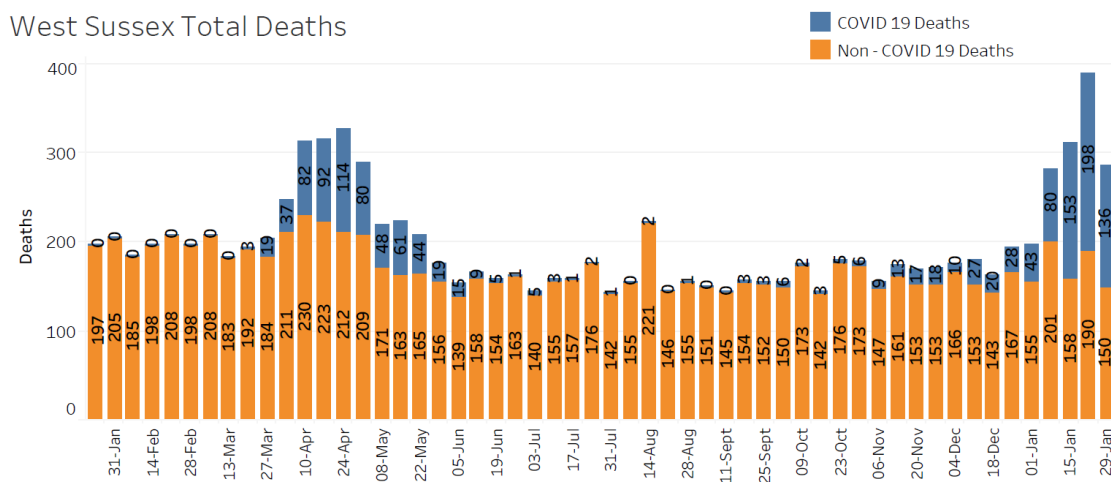
*COVID-19 patients – ITU / HDU*

Brighton and Sussex University Hospitals NHS Trust	32
Surrey and Sussex Healthcare NHS Trust	5
Western Sussex Hospitals NHS Foundation Trust	21

*% of Beds Occupied by a COVID-19 Patient*

Brighton and Sussex University Hospitals NHS Trust	13%
Surrey and Sussex Healthcare NHS Trust	19%
Western Sussex Hospitals NHS Foundation Trust	14%

6. **Deaths** have risen considerably in recent weeks, however in the most recent week (week ending 29th January, of deaths registered to 6th February) there was a fall:
  - a. The number of COVID-19 deaths for West Sussex residents was 136 (compared to 198 the previous week).
  - b. The number of COVID-19 deaths for West Sussex residents who died in a care home setting were 54 (compared to 78 the previous week).
  - c. The overall number of deaths (from all causes) in a care home setting were 98 (compared to 137 the previous week)
7. So far there have been 1,424 deaths for West Sussex residents involving COVID-19, based on any mention of COVID-19 on the death certificate. 754 (53%) of these deaths occurred in a hospital setting and 568 (40%) occurred in a care home setting.



8. **COVID-19 Vaccination Programme** The NHS (Sussex Health and Care Partnership) is leading the COVID-19 Vaccination Programme across Sussex, working with Local Resilience Forum partners. The County Council are supporting the Vaccination Programme as needed.
9. The Programme is being rolled out at great pace; to date more than 350,000 people across Sussex have received this vital protection and many more thousands are due over the coming weeks.
10. People in the eligible groups are being offered the vaccine in a range of ways – at larger vaccination centres, at local GP led vaccination services, a roving service that has been visiting care homes and people who are housebound, and a small number of pharmacies.
11. There are now three vaccination centres open; the Brighton Centre, Crawley Hospital and in the Welcome Building in Eastbourne.
12. The Sussex Health and Care Partnership (SHCP) advise that they are on track to have offered the vaccination to the first \*four priority groups, [as advised](#)

[by the Joint Committee on Vaccination and Immunisation \(JCVI\)](#), in line with the Government target.

13. The SHCP COVID-19 Vaccination Programme website is regularly updated and provides the latest information:

<https://www.sussexhealthandcare.uk/keepsussexsafe/sussex-covid-19-vaccination-programme/>

\*JCVI Priority Groups 1-4: 1. Residents in a care home for older adults and their carers, 2. All those 80 years of age and over and frontline health and social care workers 3. All those 75 years of age and over 4. All those 70 years of age and over and clinically extremely vulnerable individuals

#### **14. Vaccination Programme Data**

*Note:* Vaccination data are not provided at lower tier local authority level, we are anticipating that it will be published soon. Given the scale and speed of the vaccination programme figures do change frequently. The Sussex Health and Care Partnership (SHCP) publish regular newsletters, the West Sussex newsletter of 11<sup>th</sup> February states that 92.7% of West Sussex 80+ year olds have had their first dose, with 91.2% of 75-79 years olds and 78.8% of 70-74 years olds. 79.5% of people classified as clinically extremely vulnerable, irrespective of age, had also been vaccinated.

11/02/21	Sussex		West Sussex	
Priority group	First dose	%	First dose	%
Age 80+	101,612	90.4%	55,610	92.7%
Age 75-79	69,584	89.8%	37,349	91.2%
Age 70-74	79,824	76.8%	42,623	78.8%
Clinically extremely vulnerable individuals	48,097	74.3%	27,177	79.5%

[Link to SHCP vaccination newsletters](#)

#### *Local Tracing Partnership (LTP)*

15. Last November, the West Sussex Local Tracing Partnership (LTP) launched across East Sussex and West Sussex to support the national NHS Test and Trace system. Since November the LTP has contacted 69% of those cases that the national NHS Test and Trace system has not been able to contact (data as at 7 February 2021).

16. Following a large increase in case numbers since 1 January, case volumes have continued to reduce steadily (data as at 7 February 2021). This could be due to the impact of national lockdown restrictions, however, there are likely many confounding factors contributing to this reduction, and it is too early to tell if this trend will continue.

17. In addition to text and emails, the LTP are also contacting new cases by post. This is a further engagement tool for those who don't want to answer calls or where the LTP have an incorrect or missing phone number but have an address that they believe to be correct.

### *Community Testing*

#### *Asymptomatic Testing Programme in West Sussex*

18. West Sussex currently has sufficient testing capacity under existing arrangements to meet demand.
19. Government is keen to roll out additional asymptomatic testing across England for those who cannot work from home, to break the chain of transmission. Overlapping programmes have been launched to roll testing out.
20. One programme is focused on delivery of lateral flow testing by local authorities, where the Department of Health and Social Care are working with the sector to set up lateral flow testing infrastructure. Locally, the programme is being co-ordinated among partners across Sussex (upper tier authorities, the Police and Fire & Rescue Services) – to ensure consistency of approach, and we're currently in the process of establishing the operational priorities and logistics required to ensure the testing can be carried out effectively.
21. Separately, the Department for Health and Social Care launch a programme nationally where Government work with companies with over 50 staff members to set up testing capacity directly.

## **B) Clinically Extremely Vulnerable and the Community Hub**

### Clinically Extremely Vulnerable

22. As part of the national lockdown, the Government has advised all clinically extremely vulnerable (CEV) people to take extra measures to protect themselves during this period.
23. Clinically extremely vulnerable people are advised to stay at home as much as possible. They may still go outdoors carefully to exercise or to attend health appointments but are strongly advised not to visit shops or supermarkets. Individuals are directed towards their Local Authority Community Hub to assist in the provision of food and essential supplies if they are unable to shop online and do not have a support network able to assist.
24. The County Council is still receiving updates to the Shielded Patient List which identifies those who are Clinically Extremely Vulnerable (CEV). As at 2



February 2021 there are 35054 residents in this group across West Sussex. This is an overall increase of 100 from the previous data update dated 22 January.

25. Since this data has been available in the first wave of the pandemic 3239 individuals have been removed as their condition no longer classifies them in the most at risk and 2871 have died. Early indications suggest that a review of the Clinically Extremely Vulnerable cohort will be undertaken during February with a significant uplift in numbers seen nationally. As yet the impact for West Sussex is unknown.
26. Emails and letters have been sent to all individuals on the CEV list reminding them of the support available via the Community Hub. Individuals newly added to the CEV list are contacted by telephone along with those who register on the National Shielding Support Service (NSSS) platform asking for support.

#### *Community Hub*

27. The Community Hub, launched in late March 2020, is available during this national Lockdown to provide a range of support and practical assistance for all residents of West Sussex as well as almost 35,000 Clinically Extremely Vulnerable individuals.
28. Telephone lines remain open from 8am to 8pm, 7 days a week supported by website content and a series of e-forms to provide digital access. Additional staff have been temporarily redeployed from across the Communities Directorate to enable an increased level of proactive outbound contact during this new National Lockdown whilst recruitment of additional staff to bolster capacity is completed.
29. Clinically Extremely Vulnerable individuals, or their friends and family are encouraged to contact the Community Hub or use the online registration service. This service can be found at <https://www.gov.uk/coronavirus-shielding-support>, Individuals registering on this platform and indicating they require support will be telephoned directly by the Community Hub.
- 30.
31. Outbound contact from the Community Hub to newly added Clinically Extremely Vulnerable residents is ensuring that they are able to receive the practical support they may require and providing reassurance to those who may only just have received their clinical diagnosis.
32. The County Council continues to utilise its own locally developed sustainable food and supplies offer available via the Community Hub, providing flexibility to support either a one off or ongoing requirement. Each food and supplies delivery is followed up by a call to minimise dependence by working on sustainable options where appropriate.

33. Between the formal reintroduction of Shielding as West Sussex moved into Tier 4 restrictions, ahead of the National Lockdown, and the most recent Government return on 4 February 2021, 356 households have been directly supported by the Community Hub with the provision of food. This equates to a total of 807 food packages.
34. There are a number of food options available via the Community Hub to accommodate different individual and household circumstances. The detailed breakdown is as follows; Emergency non-perishable food and supplies 53; Standard Doorstep Delivered Food Boxes (fresh and non-perishable items, supports 2 people for a week) 581; Apetito ( 1 hot lunch and 1 cold supper a day for 3 days) 150; and Doorstep Delivered Breakfast boxes (optional for Apetito customers, breakfast for 3 days) 23.
35. Government require a fortnightly data return on the activity undertaken by the Community Hub to support the Clinically Extremely Vulnerable.

*COVID Winter Grant Scheme*

36. On 8 November 2020, the Government announced extra targeted financial support for those in need over the winter period. West Sussex County Council was allocated £2m from this COVID Winter Grant Scheme.
37. Designed to provide direct assistance to families with children, other vulnerable households and individuals this grant covers the period from early December 2020 until the end of March 2021.
38. There is a requirement for the County Council to determine eligibility across the county and targets support within the scope of the grant conditions to provide direct assistance to individuals, vulnerable households and families with children particularly affected by the pandemic with meeting the cost of food, energy and water bills and other associated costs.
39. Working in partnership with our Schools and Further Education establishments children and families in receipt of Free School Meals during term time were provided with a £30 supermarket voucher to assist over the Christmas holiday. In recognition of how financially challenging recent months have been for many families across the county, the value of vouchers has been increased from £15 to £20 per eligible child for the February Half Term, and as per communications, schools can order from 8 – 12 February 2021
40. Working in partnership with the voluntary and community sector a number of locally based food and support models have been established. These build on existing networks but increase the accessibility and reach. Funds have been distributed to a number of organisations including Stonepillow, Horsham Matters and Age UK.
41. Age UK will deliver low-cost nutritious meals to peoples' homes with a chat, check and refer service alongside the provision of hot meals through day centres. In addition, they will give advice on wellbeing in winter from nutrition through to improving warmth and energy consumption in the home

and fit home improvements to increase warmth and reduce energy and water use. Anyone interested in receiving meals, energy advice or other support should call 01903 731 800 or email [info@aukwsbh.org.uk](mailto:info@aukwsbh.org.uk)

42. Citizens Advice will be distributing fuel and cash vouchers to eligible households for the period until the end of March. The scheme will be accessible to households with a pre-payment meter, credit meter and any other households struggling to pay for their fuel. The scheme will cater for households struggling to pay for gas, water, electricity and domestic heating oil and portable gas cylinders. Residents can access via 0808 278 7969 and advisers are available to answer the phone 9 am to 4:30 pm Monday to Friday.
43. Sussex Community Foundation are administering a funding programme on the County Council's behalf to support West Sussex VCSE organisations, Mutual Aid Groups, and Town and Parish Councils which are well placed to identify vulnerable households most in need of support. Organisations can apply via [https://sussexgiving.org.uk/named\\_funds\\_posts/covid-winter-support-fund/](https://sussexgiving.org.uk/named_funds_posts/covid-winter-support-fund/)
44. Funds have also been used to assist vulnerable individuals already known to the County Council.

### **C) Children, Young People and Learning (CYPL)**

45. The Executive Director, and her team, continue to ensure that there is a robust focus on service improvement, despite these challenges.

#### *Social Care Update*

46. Staffing levels remain good, however numbers of staff needing to isolate are rising, and there is some significant degradation to in-house residential provision. This is being well-managed and closely monitored at present and all in-house residential and fostering placements for our children remain stable. Staff in the department have been notified that it may be necessary to temporarily divert work to support other more critical priorities, including residential provision. At present there are no reports of staff with children of school age being unduly impacted by the partial closure of schools, with classroom places available where appropriate.
47. We know, from an analysis of the impact of the first national lockdown, how important it is that face to face visits to children open to social care continue. Guidance has been issued to staff and foster carers to ensure continuation of these visits, and to ensure contact with birth families is undertaken safely. All children open to social care continue to be RAG rated to ensure targeted responses to those children and families most in need are prioritised and safeguarded. This includes young people being worked with by the Youth Justice Service.

48. Early Help services are continuing, mainly remotely, but physical visits to families are continuing when required and workers are also delivering food parcels to vulnerable families under financial pressure.
49. There is a stable and sustainable stock of PPE which is being well managed to ensure delivery of frontline and other critical services.
50. Work is underway to ensure that all eligible staff (internal and from provider organisations) have good access to the vaccination programme. Future reports will provide data – but early indications are that take up is steadily increasing.

#### *Early Years & Childcare*

51. Early years providers were, unlike schools who only remained open for children of Key Workers and Vulnerable children, were expected by the Government to remain open for all children under 5 years old. This caused significant pressure on the Early Years sector. The impact of this on business sustainability across the whole sector, for what are mostly small businesses, is significant. This may impact on the wider County Council statutory duties to ensure sufficient childcare places as outlined in Childcare Act 2006 especially in the early year sector (nurseries, preschools and some childminders) that deliver the Free Entitlement (FE) funding. On 14 January, the government published updated their guidance for the Early years Census 2021. This outlined that, where a child would normally attend Early Years provision, and that provision is made available to them by the provider, their expected hours should be recorded in the Early Years Census, where signed Parental Declarations are in place on or before 21 January 2021. This means children who, were it not for the impact of COVID-19 on either their own personal circumstances or on the operation of their Early Years setting, would be attending Early Years provision. This includes children who have previously attended the provision and children who were expected to start attending the provision in January. This means that setting can receive Free Entitlement for children they would be expected to see if they remain operating according to the current government guidance.
52. Of the 429 group-based providers registered with the County Council to provide this funding, in the week beginning 11/18 January:
  - 96% are open
  - 2% are partially open
  - 0.7% are only open for critical workers and vulnerable children
  - 1% are currently closed
  - 0.3% are unknown
53. This change has meant that, where settings were currently struggling with high levels of staff absence due to sickness or their own access to childcare and a reduction in children attending and were concerned that they will be have no option but to close or reduce their offer to families, the majority of providers are currently offering places to all children whose families want them to attend. We are monitoring this situation weekly and continue to

support childcare providers and parents through the Family Information Service.

54. The updated government guidance about Spring term Free Entitlement funding means that our future funding allocation will be determined on the number of children registered to attend early years provision on 21 January. We are continuing to work to identify any settings not currently fully open to children to ensure access for families when they are ready for their child to attend.
55. The current position is that a significant number of children are not accessing their entitlement due to parental concerns around COVID-19, as well as the issues outlined above, and as concerns increase, numbers in attendance are likely to decrease. Whilst the change to the position on funding has had a positive impact for our providers, the issues around access to asymptomatic testing and vaccination are still factors causing high anxiety within the sector. There is significant national lobbying underway on this issue.

#### *Education and Skills Update*

56. All schools are now partially open and are working to meet the needs of face to face teaching for all vulnerable children and the children of critical workers.
57. Whilst the majority of children of critical workers have secured a school place with 73.4% of children of critical workers attending school compared with national average of 69.5% and a South East average of 69.8%. As the term progresses, some schools are indicating increased pressure as parents struggle to support their child at home. For some schools, children in this position are now being deemed vulnerable. The staffing pressures exacerbated by union advice and LGA guidance, which conflicts with the DfE guidance, continues to present a risk to the ability of schools to continue.
58. School attendance during the third week of term in primary schools 23.4% compared with a national average of 21.1% and a South East average of 20.8%. In secondary schools, attendance was on average 5.6% compared with a national average of 4.3% and a South East average of 4.1%. For pupils with an EHCP, attendance in full or partially opened schools is 31.7% which is below the attendance of children with EHCPs in the South East 34.2% and below the national average of 35.6%. For children with a social worker, attendance averaged at 38.2% which was slightly higher than the previous week lower than the national average of 41% but broadly in line with the average for the South East (38.8%). For pupils who are eligible for a FSM and deemed disadvantaged, 18.78% attended school during the second week of term which is much higher than the national average of 13% and a South East average of 15%.
59. Special schools are providing a blended approach with those with the greatest need receiving face to face full time, others with a blend of face to face and home learning, and others with home learning only. This is the only way that special schools can manage provision safely.

60. Whilst some secondary schools are applying the lateral flow testing arrangement, the DPH recommends against serial testing of students and the DfE have suggested a pause. Primary schools have also now received their lateral flow test units from the DfE.
61. IT access for disadvantaged pupils working from home has been supported with additional guidance and access for schools to order through a DfE ordering portal. The portal is under extreme pressure nationally as schools put forward their requests. However, secondary schools and some primary schools are reporting that they have received hardware.
62. West Sussex is recommending moving towards the national Edenred voucher system which has now gone live. This is a national voucher scheme managed by the government for the provision of food vouchers for children eligible for a Free School Meal. The vouchers are for £15 per week to cover the cost of five lunches and parents can use these at many local supermarket chains. Whilst the scheme ran in the summer 2020, it was paused when children returned to school and has only recently been relaunched.
63. Home to school transport is working well overall and the transport team are working with our special schools to provide flexibility, based on each school's plans and needs.
64. School Effectiveness Link Advisers are organising a timeline of focused calls with schools over the term to pick up on vulnerable children not in school, on home-based learning provision, and on provision and learning progress for disadvantaged pupils. They are also a key contact for school leaders to raise issues.

#### **D) Care Homes - update**

Care homes

65. There are 232 care homes for older people in West Sussex. The care homes provide around 8,570 beds. A third of these are commissioned by the County Council with the remainder commissioned through other local authorities, health or funded directly by residents.
66. For the week commencing 8 February 2021, 62 care homes for older people had a confirmed case among staff and/or residents. In the same period, 20 learning disability and one mental health service had confirmed cases.
67. For the same week, local data on care homes reports admissions are currently restricted in:
- 83 care homes for older people,
  - 4 extra care setting,
  - 20 care homes for mental health/learning disability,
  - 1 domiciliary care provider, and
  - 8 supported living settings.

68. There has been a continuing increase in the number of positive cases within care services throughout January. Initial indications at the week commencing 8 February 2021 are suggesting a slight decline in the number of care services impacted with positive cases since the previous week although the number affected remains high. Outbreaks are also being seen within community services with increasing reports from domiciliary care providers of staff and/or customers testing positive and impact on securing sufficient staffing. The Council is supporting some providers by liaising with care worker agencies to secure additional resource, however staffing capacity, particularly nursing has become very stretched and this is presenting concern about the availability of staff. The Council, working with Public Health and the Clinical Commissioning Group, continues to provide daily support for care services with confirmed outbreaks or identified cases of Covid-19.

69. Vaccination teams from GP-led services and Sussex Community NHS Foundation Trust have enabled Sussex to meet the government target to vaccinate older care home residents by the end of January 2021. A small remainder of homes in Sussex had visits deferred for safety reasons during local outbreaks and these along with other residents or staff that were unwell or unable to have the vaccine during the initial visit will be re-visited as soon as possible. Care staff across Sussex also continue to be able to access the vaccine daily at vaccination centres.

70. With an increase in the number of services closing to admissions as a result of having Covid-19 outbreaks, pressure is placed on the health and social care system when trying to discharge people from hospital and this in turn impacts the speed of discharge for those people who are medically ready for discharge.

#### *Adult Social Care Rapid Testing Fund*

71. On 23 December 2020 the government announced a £149m fund to support the roll out of lateral flow device (LFD) testing in care homes for staff, visiting professionals and close contact visiting. This is a new grant with separate conditions to the previous Infection Control Funds. Care homes currently have access to 3 tests per week for their staff, with daily testing for 7 days in the event of a positive case to protect staff and residents. The total allocation for West Sussex is £3,284,756.

72. This funding was paid in a single instalment to local authorities in January 2021 and it can be used to cover expenditure from 2 December 2020 to 31 March 2021.

- 80% must be passed to care homes on a 'per beds' basis. This includes residential drug and alcohol services.
- 20% must be used to support the care sector to implement increased LFD testing but can be allocated at the local authority's discretion.

73. The government has set out what the funding can be spent on, which includes staff training for LFD testing, recruiting staff to facilitate increased testing, establishing a separate testing area and equipment for tests or their disposal.

74. On 3 February 2021 the Council took an executive decision to approve the distribution of the grant in West Sussex. 80% of the grant is therefore being distributed equally between all eligible homes in West Sussex (9,060 beds) equating to £290.04 per bed to support the LFD testing. The remaining 20% is being allocated at the same rate per bed to each of the 1,270 supporting living and extra care beds in West Sussex, plus extra funding is being distributed to smaller care settings (20 beds or less) where the costs of introducing LFD testing are proportionately higher.

#### *Adult Social Care Workforce Capacity Fund*

75. On 17 January the government announced a new £120m fund to help local authorities to strengthen adult social care staff capacity and ensure that safe and continuous care can be achieved.

76. The indicative allocation for West Sussex from the government using the adult social care relative needs formula is £1,651,726.

77. Guidance on the funding was published on 29 January 2021 and includes a requirement for the Council to report to the Department of Health and Social Care on the planned use of the grant by 12 February 2021. The final decision on the use of the grant will be made by the Lead Member for Adults and Health.

#### *Commissioning*

78. Care commissioning activity has been undertaken to support additional demand for health and social care support in the county over the winter months. Contracts have been awarded and commenced for:

- Additional domiciliary care hours across a range of both urban and rural areas, which have been delivering since 6 December 2020 and are increasing in volume as demand requires and capacity allows.
- Additional Home First Care capacity across the county, focussed on densely populated areas, which started on 14 December 2020 and are also increasing hours of delivery as required.
- Block contracted beds within care and nursing homes focused on supporting people with dementia and nursing dementia needs.
- Live in care provision for people being discharged from hospital and returning home, which commenced in the week commencing 18 January 2021.
- Extra Care service providers have started to make beds available on a short stay basis from the week commencing 18 January 2021, for people being discharged from hospital with care available according to the person's needs.



- Overnight care is being purchased on an individual basis as required for people who may be able to return home but have some overnight care needs at least initially. This also commenced from the week of 18 January 2021.
- On 26 January 2021 the Council published a decision to commission additional capacity to support hospital discharge. As a result, two short term care services within a hotel setting commenced in the week commencing 1 February 2021 for people being discharged from community hospital beds or acute hospital services to be supported prior to assessing their longer-term needs.

79. These alternative solutions will support our health and social care services at this time of significant pressure and enable people's care needs to be met where we face restrictions in a large number of services.

80. The County Council is also working alongside the Clinical Commissioning Group, NHS Continuing Healthcare, Sussex Community NHS Foundation Trust, primary care, the Care Quality Commission and local providers to establish a designated settings service which will support people within hospitals who are testing positive to Covid to be discharged when medically ready to leave hospital.

#### *Mental health system*

81. Additional funds of £1.4m have been allocated to Sussex by NHSE to support timely discharge of people from mental health beds. In West Sussex this has increased the capacity of the successful discharge to assess model delivered by the community and voluntary sector and enhanced housing support to enable people to remain/return to their homes safely.

#### *People with learning disabilities*

82. Over recent weeks more settings where people with learning disabilities live have been impacted by outbreaks of Covid-19 which, given the 'household' nature of these and smaller staff teams, can have a significant impact. The Council is actively working with providers to connect them to agencies who can supply temporary staff and considering ways to increase the available workforce.

#### *Hospital capacity*

83. At the present time there is significant pressure on the acute hospital and community bed capacity in West Sussex due to current numbers of people requiring treatment for Covid 19 alongside usual seasonal demands. The Council is working with the hospitals to support timely discharge pathways but this is also a considerable challenge due to the level of demand and the number of care homes with restricted admissions due to Covid-19.

84. Hospital discharge hubs and a combined placement and sourcing team (CPST) continue to operate, as well as working with the Clinical Commissioning Group to secure appropriate levels of domiciliary care, care/nursing home beds and voluntary services to support effective

discharge. The additional commissioned winter capacity, on top of the County Council's commissioned Hospital Discharge Care Services which commenced in April 2020, aim to support swift discharges and enable people to return home where possible following discharge from hospital. Due to levels of demand at present, and the number of care homes which are restricted to admissions due to COVID-19, the discharge hubs and the CPST are under considerable pressure.

**Key decision: Yes  
Unrestricted  
Ref: CAB17 (20/21)**

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## **Report to Cabinet**

**February 2021**

### **Consultation on Early Help Service Redesign Proposals**

**Report by Executive Director of Children, Young People and Learning**

**Electoral divisions: All**

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#### **Summary**

This report seeks approval for a wide consultation on proposals for a redesign of Early Help services. The consultation plans are fully described. The aim of the proposals is to provide an improved and targeted offer to vulnerable children and families and alignment with children's social care.

The report sets out the current Early Help offer (section 3), the enhanced targeted service being proposed and detail on the proposal for a new service model and how it has been developed (sections 4 and 5 and Appendix A). The detail of the consultation and consideration of alternatives to the proposed model are set out in section 7.

#### **Recommendation**

Cabinet is asked to approve the plans for consultation from early March 2021 on the proposals for the Early Help service, the outcome of which will return to Cabinet in July 2021 for further consideration of the proposals for the service.

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#### **Proposal**

##### **1. Background**

- 1.1 This proposal outlines plans to consult on a new Early Help model of delivery to improve the quality of a child's home and family life, enable them to perform better at school, provide early prevention of harm and improve their long-term outcomes. The improved targeted early help offer should reduce the need for higher level intervention and therefore the demand on children's social care services.
- 1.2 Rising demand in Social Care and Early Help means there is a need to ensure that every part of the early help resource is maximised to improve outcomes for children. In line with national trends, West Sussex has seen a significant increase in the numbers of children who are the subject of a child protection plan and in the numbers of children looked after. There is also a significant increase in the number of Early Help Plans. It is clear that demand will continue

to increase, and it is vital that early help services are effective at targeting and reducing demand for social care. Consultation will test these expectations.

- 1.3 The review of the current offer has included an evaluation of the whole service offer, including targeted intervention, the current delivery points, the group offer, analysing the centres’ usage as well as a scoping of the health and library offer across the county to understand the range and reach. It also included a review to check if there is any duplication in the offer as well as an assessment of the impact of the proposed changes on service delivery. Critical is the ability to reach children who are most in need which requires the service to provide a much more agile approach. Feedback from consultation will help inform this.
- 1.4 Not all of the current early help services will be in the scope for this service redesign proposal and the planned consultation. The services set out below in Table 1 will not be included. They will be developed as part of the wider service redesign that is currently underway within Children Young People and Learning to provide a more seamless service provision as part of the Family Safeguarding model.

**Table 1 – Services out of scope for the Early Help Redesign proposals:**

<ul style="list-style-type: none"> <li>• Youth Emotional Support</li> <li>• Domestic Abuse</li> <li>• Youth Homelessness</li> <li>• Early Years and Childcare</li> </ul>	<ul style="list-style-type: none"> <li>• PAUSE</li> <li>• Young Carers</li> <li>• Intentionally Homeless</li> <li>• Business Support and Performance</li> </ul>
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**2 Context – the aims of the service review proposed for consultation**

- 2.1 In 2017 early help services were known as the Integrated Prevention and Earliest Help (IPEH) service. It was created by bringing together several different services and functions including Think Family, the Youth Service and The Early Childhood Service. The review was needed to ensure a more joined-up approach with other children’s services and partners.
- 2.2 The service review aims to support the principles of the West Sussex County Council Reset Plan 21/22 to 24/25. The Reset Plan outlines the need to strengthen our support to those who need it most. This means we will need to:
  - Prioritise the most important things to do
  - Manage the demand on our services better
  - Make sure our resources go where they are needed most
  - Make the very best of resources in the short and long term
- 2.3 The Reset Plan specifically informs that Children’s Services should maintain a ‘whole family’ approach to ensuring children are safe, with families supported by multi-agency ‘early help hubs’ to provide coordinated support.
- 2.4 Recognising the need to modernise the service to meet the needs of the most vulnerable children a detailed and comprehensive review has now been completed underpinned by the following principles:
  - services are targeted to those in greatest need
  - services are proportionate to the level of need
  - to put children first and ensure that they are listened to

- a service that is seamless and integrated
- meets all statutory requirements
- to support partners to provide universal services

### 3 Current Model

3.1 The current Early Help service comprises:

- **6 Early Help Hubs**; one in each district locality providing support to children aged between 0-19 or 25 if a young person has additional needs. Each of the 6 Hubs offers 4 core services, Family Support, Enabling Families, Termly Conversations, Youth Support.
- **Family Support** is a targeted offer to support children and families with more complex needs who require help through the coordination of a multi-agency Early Help Plan.
- **Enabling Families** provides a short-focussed offer of up to 5 sessions often addressing parenting or single issues which if unaddressed could escalate to require an Early Help Plan.
- **Termly Conversations** is an offer to education partners where a scheduled meeting is conducted on a termly basis to discuss children the school have emerging worries about. This is with the view to early identification of issues that the school can support and respond to as well as a named link worker supporting with partner held Early Help Plans.
- **Youth Support** is delivered in youth centres through group work, one to one youth support and *Find It Out* drop in with a focus on education, employment and training opportunities, health and wellbeing.
- **43 Children's Centres** providing support to families with children aged 0-5 years dealing with child development and school readiness; parenting aspirations and parenting skills; child and family health and life chances. Included in these centres is 1 sensory/play vehicle shared between 3 rural districts.
- **Information, Advice and Guidance** is also offered as part of the early help service and includes, **Crisis Support**, support to access **Free Entitlement** for 2, 3, and 4-year olds and the **Family Information Service**.

3.2 The review demonstrated that;

- The current 'centre-based' offer does not necessarily reach those children and families who are most in need of help.
- The number of families visiting centres in some areas is very low and, in several areas, the most vulnerable children and families do not visit the centres.
- Those who visit centres are mainly those who can access other universal services.
- Each centre requires a minimum number of staff to safely operate and perform facilities management tasks, diverting resources from those most in need. Many centres are only able to be open on a part time basis due to staffing required.

#### **4 Proposals for Change - the focus for consultation**

- 4.1 Central to the proposal is the greater alignment of Early Help and Social Care as well as moving towards having co-located locality teams. This change should strengthen relationships within Children's Services improving the journey for children who require help and protection as well as creating better connections locally to partners promoting a shared responsibility to the children within localities. Appendix A outlines the proposed Early Help offer on a page. This will aid the consultation work as an easy reference document.
- 4.2 It is proposed to have a greater focus on intervention pre and post-statutory support. Early Help continues to evidence improved outcomes for children who receive a targeted intervention through an Early Help Plan. This work has the highest success rates both for improving outcomes for children and families and reducing the demand into children's social care. Early Help supports circa 4,000 children a year on Early Help plans. Where children's needs are met through an Early Help Plan, less than 3% go on to require a social care intervention in the following 12 months. These outcomes support the key performance indicator for early help in the Reset Plan to achieve a set percentage of Early Help Plans closed with outcomes met and without 'step-up' to social care. The West Sussex Early Help targeted intervention is also recognised nationally as a leader in achieving outcomes for the *Troubled Families* program.
- 4.3 The new model proposes an increase in the staff delivering targeted interventions with a view to the service operating in a more agile way in communities. The review has identified those centres that are in the areas of highest deprivation and therefore highest demand and it is proposed that these centres are maintained and open full time in the new model to improve their usage. The new model proposes to reduce the overall number of Early Help delivery points across the county with a minimum of one access centre in each district and borough. This is an approach that has been undertaken by a number of local authorities and the consultation information will provide some examples of where this approach has been taken and what the impact was.
- 4.4 A higher proportion of the Early Help offer has always been delivered in the community, with less than a third, taking place at designated delivery points. With most of the early help offer conducted in family homes, the community, with schools and partners. While the COVID19 pandemic did not form part of the initial offer review it has demonstrated the need for the service to modernise and to be more responsive and agile. Early help has not been delivered from centres since March 2020 instead centre based staff have mobilised to deliver in the community and virtually. This enabled staff to continue to deliver the provision of information, advice and guidance, high levels of crisis support and the follow up of Free Entitlement.
- 4.5 Reduced building/facilities management effort will enable the service to redirect resources to the targeted interventions. Consultation input and evaluation will help to test these assumptions. Centre proposals and access to service analysis is in Appendix B. The proposed change in delivery points is as follows:

**Table 2: Delivery Point Changes**

Type	Current number	Proposed number
Children and Family Centres Including 1 x sensory/plays vehicle	43	11
Youth and Find It Out (FIO) Centres	11	0

Note the Find It Out Offer would move to the remaining children centres

4.6 The Early Help service withdrawal from some delivery points would create significant opportunities for rationalisation of the estate and potential use by other County Council services or income generation from leasing properties to community partners or on the open market. The provisional timeline for implementing the proposed operating model for Early Help services is October 2021, however, the timeline to complete the rationalisation of the estate will be longer. This will also be informed by the outcome of the consultation.

## 5 Proposed New Model

5.1 The proposed new service will remain based in 6 geographical locality hubs aligned to district boundaries with each district hub containing at least 1 Children & Family Centre. (Arun 2, Adur and Worthing 4, Chichester 1, Crawley 2, Horsham 1 and Mid Sussex 1).

5.2 The proposed Early Help model is intended to:

- Provide a single point of entry for all families and professionals
- Continue to deliver from 6 locality Hubs who will work more closely alongside Social Care teams
- Increase the targeted response to vulnerable children
- Increase the *Enabling Families* Offer to those families that usually can cope but may need a little extra help
- Improve early identification; taking action to respond to problems before they are more difficult to reverse
- Improve collaboration and strengthen support to schools to support children and young people with attendance, achievement, attainment and health and wellbeing
- Promote alignment with social care so that all children and families are accessing the right help and protection from the most appropriate part of children's services
- Support collaboration with Public Health and the Healthy Child Programme to promote the best start in life for all West Sussex children and young people
- Support local partnerships to collectively improve outcomes for children and better identify when a child needs help. Making Early Help everyone's business

5.3 Early Help currently provides open access services such as *stay and play* at children centres, *open access youth groups* and *youth drop-ins*. Providers of universal services include schools, health, libraries and the voluntary and community sector. In the proposed new model, where limited early help non-targeted services will be provided, the service would support local communities

to develop and retain their support to children through enhanced and more effective partnership arrangements. Consultation output will inform this.

### **Early Intervention**

- 5.4 The County Council is still committed to ensuring intervention at the earliest opportunity to support families and this approach will be supported by a comprehensive communications plan. The proposals ensure that the County Council continues to identify and take action to respond to problems before they become more difficult to reverse. There is also the view that Early Help is everyone's business and that together we can respond early to children's needs, including the use of partner led early help plans. To that effect, it is proposed that Early Help build on the success of *termly conversations* between named link workers and schools. The aim is to support partners to deliver additional support to children by strengthening the service through the establishment of dedicated teams, responding more flexibly to support schools and partners as issues arise. Moving away from the *planned conversations* model, this team will actively support partners to lead Early Help Plans, enabling partners to put support in place before problems escalate. The new service would also be available to offer advice and support to improve the identification of vulnerable children. Support would be provided to escalate concerns about a child to the appropriate service, specifically identifying emerging needs and safeguarding concerns.
- 5.5 It is proposed that Early Help will continue to facilitate locality partnerships through local partnership boards, one in each district. The terms of reference for these boards will be reviewed and will be attended by Early Help, Social Care, Health and key stakeholders in the locality. Key stakeholders invited include service users, education, early years, elected members, voluntary and community sector. Boards will provide a network of support and information through and will focus on how partners can collectively deliver early help and improve outcomes for children and young people in West Sussex. Partner relationships will be critical to improving the identification and support of vulnerable children and families to access support. These boards will serve as a space and network for local partners who know and understand the early help offer and how to help families access the services.
- 5.6 *Enabling Families* provision will be increased in the new model. This service provides a short and focused intervention of between 1 to 5 sessions of family support work to parents. This is a parent-focused offer providing help for single issue or lower level concerns, often focused on parenting, behaviour and communication issues for those who do not require a multi-agency coordinated response. This is another key tool to help parents build their confidence and prevents problems and issues from escalating into more formal interventions. The offer can be delivered flexibly to suit parent's needs, in the community, in centres or virtually.

### **Children and Family Centres**

- 5.7 It is proposed that the new model be delivered from a network of 11 full time Children and Family centres which will provide an opportunity for Children's Social Care staff to co-locate. There will be a minimum of one centre in each district. Some universal services will continue to be delivered from these centres, such as health clinics, whilst maintaining some space to meet with children and families receiving support from Children's Services. The core



early help centre offer will be the provision of Information, Advice and Guidance for parents and the continuation of Find It Out for young people, Crisis Support; the provision of emergency essentials and support to access Free Entitlement for 2, 3, and 4-year olds. Families will have open access to all remaining centres even if they are not located in the area they live. For families and young people not able to access a centre this core offer can also be offered by phone or online. Those identified for help can also seek support via the partners, schools and the school link worker. Response within the consultation will greatly assist the evaluation of these aims before a final decision.

### **Family Support**

- 5.8 Family Support is the current Early Help targeted intervention offer which supports children who are identified as in need of help through an Early Help Plan. These children will receive whole family coordinated support from a dedicated 1:1 support worker in their home and the community. Workers support families to resolve issues, build resilience and seek to prevent them requiring a social care intervention. Early Help also provides an enhanced Family Support Keyworker offer for those who are experiencing multiple, complex or entrenched issues within their family. These workers work directly with children on the cusp of social care and are often stepped across from social care to help sustain the changes and progress made while on a child protection or child in need plan. The proposal is to increase the number of Family Support staff increasing the Early Help reach across the county and delivering more efficiencies across the directorate by preventing the need for a higher cost service. Children and families are usually identified for this support via partners, identified by school or through an early help link worker discussion or are stepped across from social care but can self-refer by centre drop in or by phone or email.

### **Impact on County Council services out of scope for this proposal**

- 5.9 The wider youth offer is being reviewed as part of the children services transformation and adolescent offer. Changes within this proposal will impact on delivery space for the Youth Emotional Support offer and Young Carers but has no effect on the structure of these teams and opportunities for delivery space will be further worked on as part of the asset plan.
- 5.10 Supervised contact requires meeting space in the community to deliver and would like full use of a small number of centres. Early Help withdrawal from some centres could provide an opportunity to create contact centres. This will be further worked on as part of the asset plan.

## **6 Other Options**

- 6.1 Other options will be included in the consultation as set out in paragraph 7.8 below. They are summarised below as is the 'do nothing' or 'no change' option and other variations to the model which will not be included in the consultation. As no final decision on the future service design has been taken it is important that other options for the service are provided within the consultation work.
- 6.2 Reduce Early Help targeted intervention: this would mean that children's needs would be at risk of not being met at the right time placing further strain on higher cost interventions. Early Help would continue to employ staff in centres

with low access rates in areas of less need and prevent the service moving to a more impactful and agile service.

- 6.3 Do nothing: this would risk a lost opportunity to improve the level of service to those who most need it. The current model is not seen to be fit for purpose as outlined in this report at section 2 above given the service improvement, alignment and development that is needed and without which costs would continue to increase. These initial assumptions based on the work to date will be tested through the consultation work and its evaluation.
- 6.4 Greater reduction in delivery points: this would result in the areas of highest need with the most vulnerable children not having open access. Centres in areas of highest deprivation have the highest centre usage rates and are being accessed by families which need them.
- 6.5 Develop the mobile offer in rural areas: consideration can be given to maintaining the early help mobile outreach offer for rural areas. Children and Family centres have operated a model previously whereby workers deliver groups from community buildings in rural areas or from the 1 sensory/play vehicle shared between the 3 areas. In this proposal open access groups would cease to be delivered in all areas leaving only the commitment to deliver Information, Advice and Guidance. This service could be delivered by a bus but would require the purchase of 2 further vehicles and would require a minimum staffing of 6 FTE at 2 grades higher than centre-based staff delivering this offer due to licencing requirements. This may not be considered good value for money for what is a universal offer that can be facilitated remotely via phone, email or virtual means. Consultation responses will test this.
- 6.6 Retain more part time centres in more areas rather than a reduced number of centres operating full time: this option has been considered but will mean part time centres which still require the same facilities management/health and safety functions at a cost to the early help budget. Multiple staff would be required to move between centres several times during the working day and week. Early help would be retaining buildings that could have alternative use from other council departments or partners. This approach would not allow any opportunity for the council to rationalise estates to reduced costs and having centres empty for a high percentage of the week may not represent good value for money. These principles and the factors which have informed the service design proposals against these options will be tested in the consultation.

## **7 Consultation, engagement and advice**

- 7.1 This is a major service redesign and the proposal will therefore require the appropriate level and reach of consultation and engagement. There are specific requirements for consultation if making changes to Children Centres, including the range of consultees, the timeliness of the process, the content of the information provided and how it is evaluated. The aim is to have a public consultation period of ten weeks. All consultation activity is subject to a quality assurance process and an Equality Impact Assessment.
- 7.2 The proposed model and the intention to hold a public consultation on this was considered by the Children's and Young Peoples Services Scrutiny Committee on 7 January 2021. The committee confirmed that it broadly supports the need to investigate an improved and targeted early help offer for vulnerable children

and families and requested that work is progressed in order to achieve this. The Committee made the following recommendations for the future consideration of the proposals:

- Clarity on how the proposals will help improve the identification and support of vulnerable children and families to access early help support.
- A communication plan on the new proposal and ongoing support for residents on how they will be able to continue to access the services, especially for those areas where delivery points will be withdrawn.
- A robust equality impact assessment.
- Clarity on the impact of the proposals on wider services, including partners who use the delivery points to deliver their services.
- Further data and information on usage and services provided in each children and family centre by all partners.
- The breakdown of consultation responses by hub area
- How the impact of Covid-19 pandemic on families has been taken into consideration when assessing the proposals and their resilience.
- Information on the outcome of early help redesign in other Local Authorities and how this learning is taken into account in the proposals for West Sussex.
- More detail around proposals for service delivery to remote service users.
- That the consultation proactively approaches service users and stakeholders and that the consultation document, including the list of proposed consultees is available to members.

7.3 These points have been addressed by providing additional clarification within the text of this paper and in the additional appendices listed below. Some of the detail requested will be provided in a further paper to the Scrutiny Committee in June. Members will be able to see the consultation material before launch.

7.4 The consultation will be based on the aims and principles of the new model as set out in this report. The consultation questions will involve consulting on four options for change;

- Increased targeted support with limited open access and information services
- No open access and information services
- Retain current open access centres
- Other suggestions

7.5 Prior to the formal consultation there have been informal engagement sessions during January/February to provide some early feedback, challenge and suggestions to inform the offer and identify further issues that may need to be addressed during the formal consultation. It is proposed that there will be a schools engagement session with a specific focus on the schools offer and a broader session for wider partners from the voluntary and community sector, districts and boroughs and local councillors, identified through the Early Help Partnership Advisory Boards and partners who currently deliver from centres. This intensive additional informal engagement with schools and the voluntary and community sector is to ensure compliance with the West Sussex Compact.

- 7.6 UNISON will be consulted ahead of the formal staff consultation on the potential impacts to staff, including possible redundancies. Initial staff briefings took place the week commencing 7th December outlining the details of this proposal.
- 7.7 External partners and service users will be consulted on the proposal in March 2021 through a public consultation process. This process will create an opportunity to review the proposed offer and raise any concerns, issues or provide feedback. The consultation will be delivered by means of a 'Your Voice Engagement Hub survey function on the County Council website and there will be briefing sessions delivered virtually outlining the offer and giving the opportunity to ask questions and give feedback.
- 7.8 While the model described in Section 5 is the currently proposed option, it is proposed to consult on the three options as outlined below. The option to make no changes to the current Early Help offer has not been included as this would not meet the principles and aims of the service. Feedback and consultation responses addressing this option will however be taken into account and applied against the principles of the aims of the service.

**Table 3: Option 1**

<b>Option 1</b>	<b>Proposed model: Increased targeted support with reduced open access and information services</b>
Summary	<p>In this option the local authority will increase the targeted intervention offer. This will allow the service to operate in the community and be more agile and responsive to need.</p> <p>There will be an increase in support to schools and in “Enabling Families” our short term one to one parent lead interventions.</p> <p>Early Help will continue to deliver some limited open access services through the retention of 11 Children and Family Centres and throughout the county via virtual means. Early help will cease the direct delivery of group work.</p> <p>This will be achieved through an increase in targeted intervention delivering direct work to our vulnerable children and families pre and post social care intervention.</p>
Key elements	<ul style="list-style-type: none"> <li>• Increased targeted intervention</li> <li>• Increased Enabling Families offer</li> <li>• Reduction in children and family centres and youth centres</li> <li>• Retaining 11 children and family centres, 8 in areas of high need and a further 3 to ensure all districts retain at least 1 centre</li> <li>• Find It Out move to be delivered from the remaining centres and online, email and phone</li> <li>• Cease the delivery of group work</li> <li>• Remaining children and family centres to offer key partners a venue to deliver</li> <li>• Enhanced offer to schools with dedicated schools’ team in each district area</li> <li>• Greater alignment with social care with colocation in centres</li> <li>• Continue to deliver information, advice and guidance, crisis support and follow up on Free Entitlement</li> </ul>

	<ul style="list-style-type: none"> <li>• Develop the Partnership Boards and support partner delivery through the provision of information and data</li> </ul>
Risks	<ul style="list-style-type: none"> <li>• Perceived disadvantage to rural communities by locating Children and Family centres in the County’s main settlements</li> <li>• Reduced capacity to support partner delivery of services</li> <li>• Reduction in suitable office space for staff</li> </ul>

**Table 4: Option 2**

<b>Option 2</b>	<b>No open access and information services</b>
Summary	<p>In this option the early help will cease to provide any open access and information services, including the provision of children and family centres, youth centres, group work and the provision of Information, Advice and Guidance.</p> <p>The available resource will be used to maximise the capacity of the targeted intervention teams to the most vulnerable children and families through direct case work and through additional support to schools.</p>
Key elements	<ul style="list-style-type: none"> <li>• No open access or information services provided by early help</li> <li>• Further increase in the number of targeted intervention workers</li> <li>• Increased Enabling Families offer</li> <li>• Withdrawal of all children and family centres and youth centres</li> <li>• Withdrawal of Find It Out with the exception of online information, advice and guidance</li> <li>• Cease the delivery of group work</li> <li>• Enhanced offer to schools with dedicated schools’ team in each district area</li> <li>• Greater alignment with social care with colocation in centres</li> <li>• Develop the Partnership Boards and support partner delivery through the provision of information and data</li> </ul>
Risks	<ul style="list-style-type: none"> <li>• Loss of access by families most likely to require information advice and guidance, reduction of open access reduces opportunity to identify need with our most vulnerable children</li> <li>• Impact on capacity to follow up on Free Entitlement potentially disadvantaging children</li> <li>• Completely removes capacity for partner delivery in centres in locations of highest need</li> <li>• Removal of all centre office space, impacting on colocation of early help and social care staff</li> </ul>

**Table 5: Option 3**

<b>Option 3</b>	<b>Retain current open access centres</b>
Summary	<p>In this option the local authority would retain the vast majority of children and families centres and youth centres and continue to deliver open access groups such as play and stay and youth groups.</p> <p>There would be a reduction in targeted intervention support for the most vulnerable children, which would not recognise the increase in demand for early help since September and the likely continued increase as a result of the pandemic. It would include maintaining the current termly offer to schools and the reducing the current Enabling Families offer (short parent led intervention).</p>
Key elements	<ul style="list-style-type: none"> <li>• Reduce capacity to deliver targeted intervention</li> <li>• Reduce delivery of Enabling Families offer</li> </ul>

	<ul style="list-style-type: none"> <li>Retention of the majority of children and family centres and youth centres</li> <li>Find It Out would remain in current bases</li> <li>Open access group work would be maintained</li> <li>Schools would continue to receive a termly conversation</li> <li>Greater alignment with social care and colocation in centres</li> <li>Continue to deliver information, advice and guidance, crisis support and follow up on Free Entitlement</li> <li>Develop the Partnership Boards and support partner delivery through the provision of information and data</li> </ul>
Risks	<ul style="list-style-type: none"> <li>Compromise the ability to support vulnerable children and meet the increase in demand for early help and future demand.</li> <li>Increased risk of children's needs not being met early enough resulting in a social care intervention</li> <li>Risk of increased pressure on social care resource</li> <li>Early help unable to meet current demand resulting in longer waiting times for vulnerable children</li> <li>Reduced capacity to support schools and partners in early identification of concerns for children</li> </ul>

7.9 It is anticipated that the formal staff consultation would take place in August 2021, lasting for a month to allow for meaningful consultation with staff and UNISON on the staff impact. This will only occur should the further decision be to implement the proposed new model. Staff will be encouraged to participate in the public consultation.

7.10 Provisional key dates:

- January/February informal key stakeholder discussion groups
- 23 February 2021 Cabinet
- March 2021 start Formal Consultation (10 weeks)
- May 2021 evaluation of feedback and impact assessments
- June 2021 Consideration by the Children and Young People's Services Scrutiny Committee of the outcome of the consultation and the final proposal
- July 2021 Cabinet decision
- August 2021 Staff Consultation
- October 2021 Implement final proposed new model

## 8 Finance

8.1 Revenue consequences of the proposal should it be implemented following the consultation exercise and the evaluation of feedback and impact assessments.

	Current Year 2020/21 £m	Year 2 2021/22 £m	Year 3 2022/23 £m	Year 4 2023/24 £m
Revenue budget	9.877	8.877	8.327	7.927
Change from Proposal	-1.000	-0.550	-0.400	0
Remaining budget	8.877	8.327	7.927	7.927

## 8.2 The effect of the proposal:

### (a) **How the cost represents good value**

The proposal would enable the Early Help service to re-focus their offer towards the families and children who are the most vulnerable and provide them with the support they need to divert them from more costly social care interventions. Working closely with schools and other partners and reducing the number of physical access points means that the Council can reduce the cost of delivery whilst implementing an enhanced targeted early help offer and an enhanced and more proactive schools offer that aims to be more preventative.

### (b) **Future savings/efficiencies being delivered**

The initial savings proposal was for £1.95m in total to be delivered over a two-year period, with £1.0m planned for delivery in 2020/21 and the remaining £0.95m to be delivered in 2021/22. Due to a number of vacant posts having been or planned to be deleted, the £1.0m has been delivered in 2020/21. Should the decision lead to the implementation of the proposed new model in October 2021 the planned saving of £0.95m in 2021/22 would be revised to £0.55m anticipated in 2021/22 and the remaining £0.4m being delivered in 2022/23. These remaining savings could be achieved by the removal of a layer of management in early help, a reduction of posts relating to the delivery points and the group work offer.

### (c) **Human Resources**

The proposal, if proceeded with, requires a revision of the current staffing structure. The number of FTE will be increased to deliver the new Early Help Offer, and there will be a reduction in or removal of other posts that will no longer be required at the same level or at all, for example some non-targeted duties or youth group work. The proposed changes also present the opportunity to review the management tiers and bring greater clarity on accountabilities.

Overall, there will be a reduction in the size of the current workforce. Vacant posts totaling 25 fte have already been removed from the establishment and the current modelling indicates a further reduction in the order of 40 to 50 fte posts which brings a potential risk of staff redundancies. However, with a continued focus on vacancy management, and active support for redeployment across the local authority, the actual number of staffing redundancies will be kept to a minimum.

### (d) **Asset Impact**

Capital Claw back - when a local authority puts forward proposals on change of use of capital projects which were funded through the Sure Start and Early Years Capital Grant, they must inform the Department of Education and, subject to prior approval, there will be no claw back of the grant where it will be used for a similar purpose consistent with the aim of the grant.

The Children and Family Centre Delivery points are subject to different clawback arrangements and relate to buildings and equipment. However, from experience to date, and in line with the proposal to rationalise the estate and use any capital receipts from the unretained buildings to support similar services, it is

understood that capital clawback may not apply. This is subject to further legal advice and consultation with the DfE.

The Estates team have produced a draft Asset Plan. Further decisions will be taken to declare assets surplus to operational requirements if this is the outcome.

## 9 Risk implications and mitigations

**Table 6: Risks - Impact and Mitigation**

Risk	Mitigating Action (in place or planned)
Potential for staff redundancy	Early Help has operated a strict vacancy management process enabling several posts to be deleted. This will continue. The need to reassign staff during COVID presents opportunities to develop broader skills and experience. Active management of redeployment across the local authority will help mitigate the actual number of redundancies.
Access to health clinics and financial risk to the Healthy Child Programme if centre access limited.	Public Health will work with the lease providers and the County Council’s Estates Service to renegotiate service level agreements.
Clawback of SureStart grant by Department for Education	The project will address the need to ensure plans align with grant aims.

## 10 Policy alignment and compliance

### 10.1 Legal Implications

Legal advice will continue to be used to address the potential capital clawback and compliance with statutory duties.

### 10.2 Equality duty and human rights assessment

A full equality impact assessment will be conducted and the plan for conducting the assessment is at Appendix C.

### 10.3 Public Health

Early Help has a collaborative working agreement with public health. The areas of specific focus are:

- Improved mother and baby health, especially the most disadvantaged
- Good mental health for all children
- Home environment – healthy and nurturing parents
- Healthy weight

These elements will be fully embedded in the proposed enhanced early help offer.



Lucy Butler

**Executive Director of Children, Young People and Learning**

**Contact Officer:** Claire Hayes, Service Leader Early Help, 07702 442462

**Appendices:**

Appendix A – Early Help Offer

Appendix B – Delivery Point Summary

Appendix C – Equality Impact Assessment Plan

Appendix D – Maps including Existing and Proposed Delivery Points

**Background Papers:** None

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## Early Help Offer on a Page

**Access** - Providing a single point of entry for families and professionals. Our Offer:

- An Integrated Front Door responding to all wellbeing concerns for a child at all levels of need

**Prevention** - For the majority family life will meet children's needs, with local 'universal' services & community networks. Our Offer:

- 11 Children and Family Centres in areas of high need
- The Family Information Service
- Information, Advice and Guidance
- Free Entitlement for 2, 3 and 4-year olds

**Earliest intervention** - Identifying and taking action to respond to problems before they are more difficult to reverse. Our Offer:

- Early Help Consultation – locality-based team with named link workers providing support and guidance to schools, including helping identify concerns, help with appropriate next steps and providing active support to lead professionals
- Enabling Families – a short focused intervention where the parent/carers can access between 1 and 5 sessions with a Family Support Worker. Parents/carers must be motivated to identify and work towards their chosen goals exploring what is working well and what the impact of current worries has on the child/children

**Targeted Intervention** – locality-based teams able to respond, prevent & build resilience for children and families while helping to reduce demand on high cost services, such as Children's Social Care, Police and NHS is reduced. Our Offer:

- Level 3 Family Support Worker led Early Help Plan to deliver a targeted intervention through the coordination of a multiagency team and plan. This is direct whole family working focused on improving outcomes for children in need of help on a range of issues
- Level 3+ Family Support Keyworker led Early Help Plan to deliver an intensive targeted intervention through the coordination of a multiagency team and plan. This is direct whole family working focused on improving outcomes for children with multiple complex needs. Children will often be on the cusp of requiring social care intervention or repeatedly come to the attention of Social Care or the Police. They may have long-term entrenched issues that require a longer duration of intervention

**Locality Partnership Boards** - Mobilising the partnership to collectively improve outcomes for children and young people in West Sussex and to engage with the critical areas of service improvement. To provide support, challenge and influence on the Partners on the board in order to ensure the local delivery of a safe and connected offer that makes sense to children, young people and their families from 0-25 years

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## Early Help Delivery Point Summary

### 1. Methodology used to identify locations

In order to select the proposed centres and location to retain, an evidence-based approach was followed using the Index of Multiple Deprivation (IMD) 2019. The IMD was used to identify the areas in West Sussex with the greatest need. These were then ranked based on largest population and current access to services.

<b>Overall Deprivation</b>	Crawley	Arun	Adur*	Worthing*	Chichester	Horsham	Mid Sussex
<b>Population</b>	Adur & Worthing	Arun	Mid Sussex	Horsham	Chichester	Crawley	
<b>Access to services</b>	Crawley	Adur & Worthing	Arun	Horsham	Chichester	Mid Sussex	

(Ranking high to low) \*Note Adur and Worthing reported separately for Deprivation

This rationale was further tested by comparing these results with a similar mapping exercise using the following additional data sets:

- Early Help plan by home location of child
- Mix and magnitude of CSC Level 4 plans (CIN, CLA, CP) by home location of child

<b>Early Help Plans</b>	Adur & Worthing	Arun	Crawley	Mid Sussex	Chichester	Horsham
<b>CSC Level 4 Plans</b>	Adur & Worthing	Arun	Crawley	Mid Sussex	Chichester	Horsham

The results of mapping these additional data sets supports the results of the IMD, population and access to service mapping in that the areas of highest need are in:

- Adur & Worthing
- Arun
- Crawley

### 2. Current Early Help Delivery Points

Early Help has 54 delivery points which are a mix of Children's Centres and Youth and Find It Out centres. The centres are also a range of leased and County Council assets and some could be subject to clawback of capital funding of Sure Start and Early Years Capital grant.

Of the 54 delivery points 2 are agreed closures in order to support and move to the Worthing Community Hub and a further 14 are satellite spaces within libraries and schools or they are office spaces only. This leaves 38 substantive sites.

### 3. Proposal

In addition to the mapping exercise, in determining the proposed delivery points to retain, we have also considered the size of the buildings, the numbers of rooms and spaces available and the opportunity to co locate other Children's Social Care Teams.

Agenda Item 5  
Appendix B

Of the 38, it is proposed that 11 centres will be retained as Early Help delivery points across the 6 district hubs: 8 in the areas of highest need; and 3 additional to ensure that every District and Borough has a centre:

Locality	Centre
Arun	Tree House (Bognor) Wickbourne (Littlehampton)
Crawley	Bewbush Broadfield
Worthing and Adur	Durrington Kingston Bucci (Shoreham-by- Sea) Lyndhurst Road (Worthing) Worthing Library project (new location involving the agreed closure of 2 centres Mar 2021)
Chichester	St James (MNS) – suggested
Horsham	Needles – suggested
Mid Sussex	Haywards Heath – suggested

These centres will be open full time, 0900 – 1700 5 days and week.

Detailed work has taken place with Public Health; WSCC Assets Team; and local Hub leads to ensure there is an understanding of the full range of pre-COVID19 delivery and the implications of the proposed reduction.

#### 4. Opportunities

The current County Council asset strategy is to rationalise the estate. In addition to rationalisation, this proposal creates opportunities for other County Council service areas and partners to bid for the use of centres, subject to an options appraisal and where required, a full business case. For example:

- **East Preston Children’s Centre** – potential for Adult services community support.
- **Gatton’s Children’s Centre** – Brighton Hospital Midwives service are requesting leasing the whole premises, which they will then sub-let to other health partners. This type of model whereby the County Council gets a market based rental income for the property and it still remains available to health partners may be a model for use elsewhere.
- **Maidenbower Children’s Centre** – Education may take this property over along with several youth centres, subject to a business case and viability studies.

Early Help will continue to work closely with the Asset Management team and Public Health to make sure that all the implications for property and assets are fully understood and that no assumptions are made that expose the County Council to extra unforeseen costs or liabilities. The Assets Management Team are also retaining the details of all interest expressed in the current estates and guiding those partners on the steps that will need to be taken should an opportunity arise. A full options

appraisal will be undertaken for each asset that is surplus, with the need to ensure best value and that the Council does not treat one party to the exclusion of others without good justification. The early development of an Asset Plan will help ensure that a programme of rationalisation can begin once the centres are closed, however meaningful negotiations will not be able to commence until a final decision on this proposal is taken.

Health services run daily across many centres. As part of the Healthy Child Programme contract there is a commitment to provide accommodation to facilitate the delivery of this service. However, this is not tied to the use of any particular building.

#### 5. Total CFC Access to Services 2019 Key Headlines

It is important to note that footfall in this context does not mean “physical attendance” at a particular building. What it means is access to services. In line with the Children Centre Core Offer Statutory Guidance, footfall is recorded both on and off site, aggregated and assigned a specific delivery point.

89,718 Unique individuals	816,389 accessing (total number of contacts)
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#### Breakdown by Hub Area

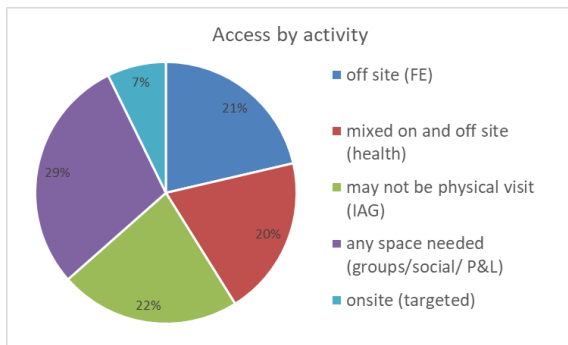
	Adur & Worthing	Arun	Chichester	Crawley	Horsham	Mid Sussex
Unique Registered Individuals	58,774	49,712	33,021	49,341	43,235	49,428
Unique individuals Attending	22,579	16,436	11,034	18,544	13,780	12,893
% Individual Attendance	38.4%	33.1%	33.4%	37.6%	31.9%	26.1%
Unique Registered Households	16,753	13,677	8,995	13,135	11,797	12,969
Unique Households Attending	9,523	7,005	4,722	7,658	5,811	5,967
% Family Attendance	56.8%	51.2%	52.5%	58.3%	49.3%	46.0%
Individuals	191,148	132,665	77,223	211,694	129,342	74,317
Average attendances per person	8.5	8.1	7.0	11.4	9.4	5.8
Number of under 5s	9,456	7,732	5,705	8,006	7,338	8,584

- Adur & Worthing has the highest level of engagement, at 74%, with individuals attending on average 4 times throughout the year.
- Mid Sussex has the lowest, at 44%, with an average number of attendances of 3.
- Across all hubs, around 50% of registered families attended at least once.
- Crawley has the highest level of contacts, with 211,694 in the year. While it has a smaller number of unique individuals attending than Adur & Worthing, the individuals that do attend do so more often (around 7 times in a year).

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6. Breakdown of Access to Services both on and off site

In line with children centre core offer statutory guidance, footfall is recorded both on and off site, aggregated and assigned to a specific delivery point.



**Analysis and interpretation mapped to proposed reduction in Delivery Points:**

- 21% Free Entitlement takes place off site by partners and will continue as is.
- 20% is provided by health through a mixture of clinics and home visits and will continue as is.
- 22% is Information, Advice and Guidance is available both face to face and virtually. This will continue to be available virtually as well as face to face in delivery points in the most deprived areas and/at a least one delivery point in each District and Borough.
- 29% is attendance at open access groups and/or drop ins. Open access will continue at the retained delivery points in the most deprived areas and/at a least one delivery point in each District and Borough. Other delivery points will be available for wider community/partners use subject to WSCC Estate agreements.
- 7% targeted. This will increase.



## **Early Help Redesign Proposal - Equality Impact Assessment – approach to consultation**

West Sussex County Council is committed to equality of opportunity, valuing diversity and eliminating unlawful discrimination. This commitment is embedded in the policy framework of the Council and informs all decisions, service plans and their implementation. It also forms a critical aim of public and service user engagement and consultation to inform decision-making.

West Sussex County Council will meet its obligations under the [Equality Act 2010](#). The County Council, in preparing for and in the taking of all service decisions, recognises its duty (the Public Sector Equality Duty) to have due regard to the need to:

- eliminate unlawful discrimination, harassment and victimisation;
- equality of opportunity between people who share a protected characteristic and people who do not share it and to
- foster good relations between people who share a protected characteristic and people who do not share it.

In the development and in the implementation of arrangements for any decision arising from the proposals being prepared for consultation the Council will ensure that decision-makers will, in a timely way, have due regard to these commitments and can show how this has been done. The consultation plan recognises the need for the assessment of proposals actions against the public sector equality duty to be carried out by reference to real and accurate information about the likely or expected impact of the proposals. Consultation and engagement activity and the evaluation of available data will be used in a focused way to understand the potential impact of proposals.

Some core information about the communities of West Sussex will provide a starting point:

- **Age** – A full understanding of the West Sussex population profile and how different age profiles appear in particular areas or communities and the implications for the groups and communities with an interest in the services covered by the proposal. To have an understanding of the age groups most affected by the service under review.
- **Disability** – To have a clear understanding of the full range of disabilities of those with an interest or stake in the service under review and its future form of provision. Using data from a national survey, the portion of the population with a disability equates to 21% of the total population, ranging from 3% of 0-4 year-olds to 60% of people aged 80+ years. This can be used as a baseline reference to assist the data available for the service under review
- **Ethnicity** – Population level data are available from the Census. In 2011, 89% of the county population were White British. Ethnicity differs between areas of the County. Crawley has 72% White British and 5.2% and 4.3% from Indian and Pakistani backgrounds respectively. The process will use the known ethnicity distribution to inform communication for the consultation as well as the assessment of output.
- **Gender/Transgender** – Data on gender is strong but there is an absence of reliable data at a national or local level for those people who have/are seeking

gender re-assignment or identify with a different gender than that assigned at birth. National statistical guide data may be relied upon.

- **Marital Status/Civil Partnership** – The Census 2011 described the marital/civil partnership status of residents. In West Sussex, 51% of people aged 16+ were married or in civil relationships, 29% single, 10% divorced, 8% widowed, and 2% separated.
- **Pregnancy and Maternity** – In West Sussex, in 2018, there were 8,540 births, 38 of which were to mothers aged 18 years or under.
- **Religion/Belief** – Data on religion are collected infrequently and the census (where the question was voluntary) remains the most comprehensive source. 66% of people in West Sussex stated they had a religious belief. Crawley had a higher percentage of people who stated their religion as Hindu (5%) or Muslim (7.5%). Sensitivity to the needs of those belonging to particular faiths or faith communities will inform assessment work.
- **Sexual Orientation** - Data are collected as part of national surveys such as the Annual Population Survey. Nationally (in 2016) ONS estimated that 2.5% of the UK population aged 16 or above identified as lesbian, gay, bisexual or 'other'. This represents 17,500 people aged 16+ in West Sussex.

### **Consultation design**

It is important that all groups in the community of West Sussex who have an interest in the service affected by the proposal have the opportunity to participate in the consultation. This requires that the consultation is designed so that it:

- Is communicated so as to reach all those affected or interested
- Is accessible to all who wish to take part
- Ensures opportunities for active engagement
- Records all relevant data and comment
- Is transparent in what data is collected and how it is assessed
- Produces analysis that is understood by those responsible for the decision
- Provides analysis that fully informs the decision for equality purposes.

### **Impacts of the proposed change and service design aims**

The service plan under review and subject to consultation aims to deliver positive outcomes for the people of West Sussex and in particular for those for whom the core aims of the service are designed. A number of the measures in the proposal are aimed to have a positive impact upon the lives of groups of people with protected characteristics. It is intended that there should not be any negative impacts on any group with a protected characteristic. These initial assumptions will be tested as plans are developed and implemented. The consultation process will gather the information for this exercise and the analysis of that information will support the application of the Public Sector Equality Duty referred to above.

### **Impact Assessment and Informed decision-making**

The work of analysing service data and information gathered as part of the comprehensive consultation process will include arrangements to ensure an understanding of all potential impacts on those with protected characteristics and the responsibilities of the Council under the public sector equality duty. There will be time

provided in the development of final proposals to ensure the data is fully understood in terms of its implications and that options to revise proposals in light of those known implications are considered.

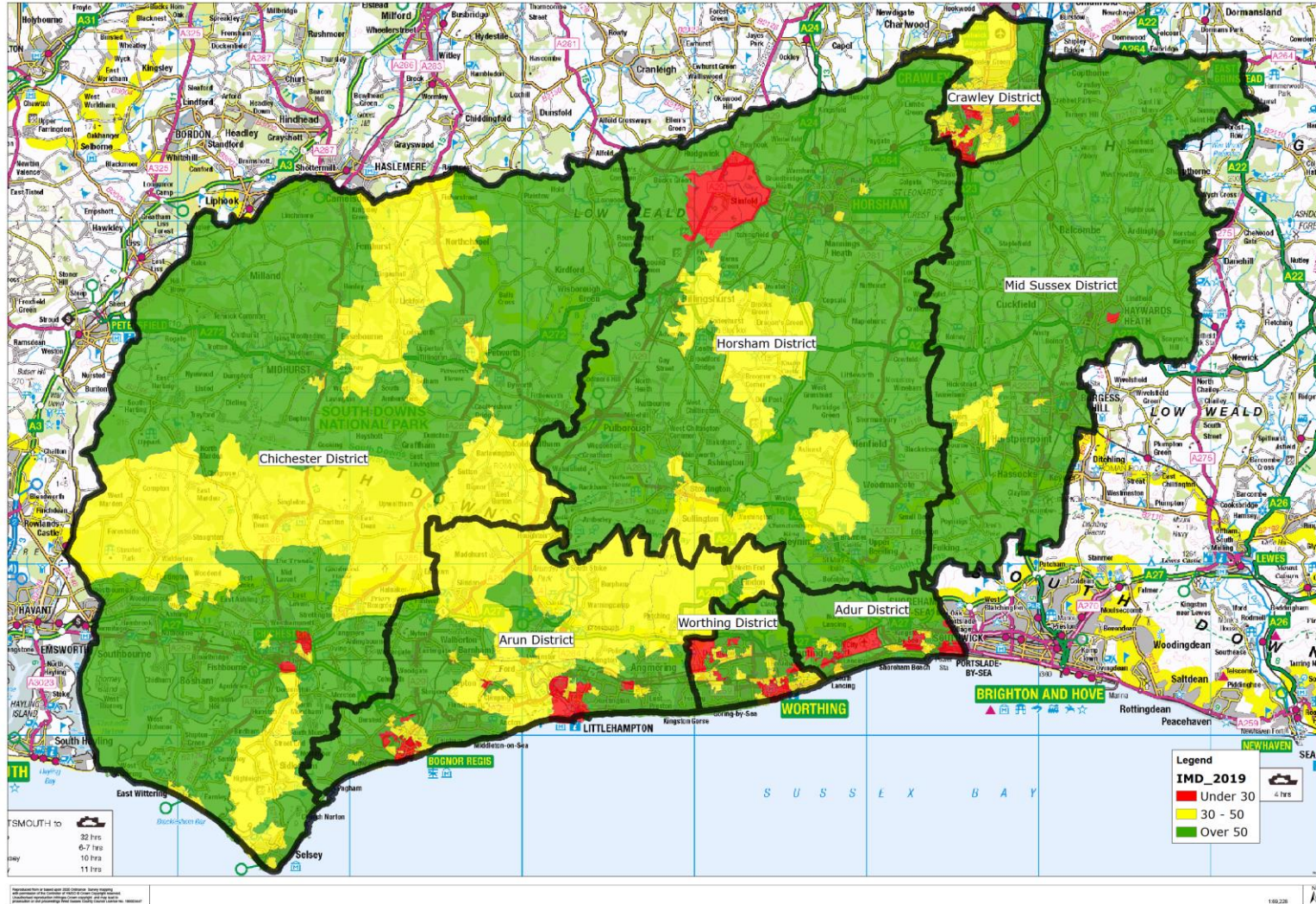
This will ensure that those who prepare proposals for consideration, those who have the task of scrutinising proposals and those charged with taking decisions carry out these tasks with the information they need to ensure the Council's equality and diversity commitments are met.

The record of the decision will provide the evidence base for the way in which the Council has discharged its responsibilities and the commitments it makes by reference to equality and diversity.

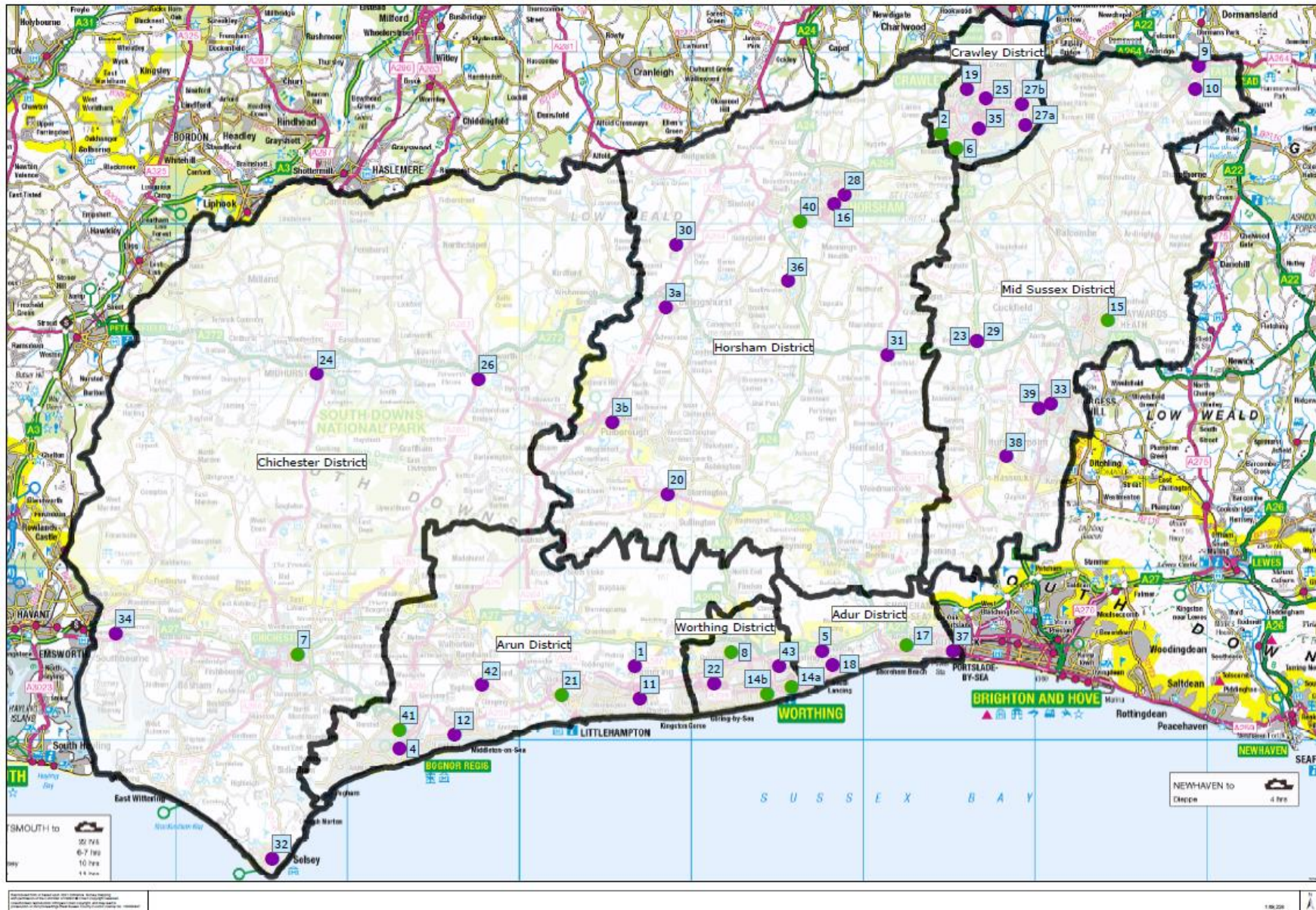
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# Index of Multiple Deprivation Map of West Sussex

IMD 2019



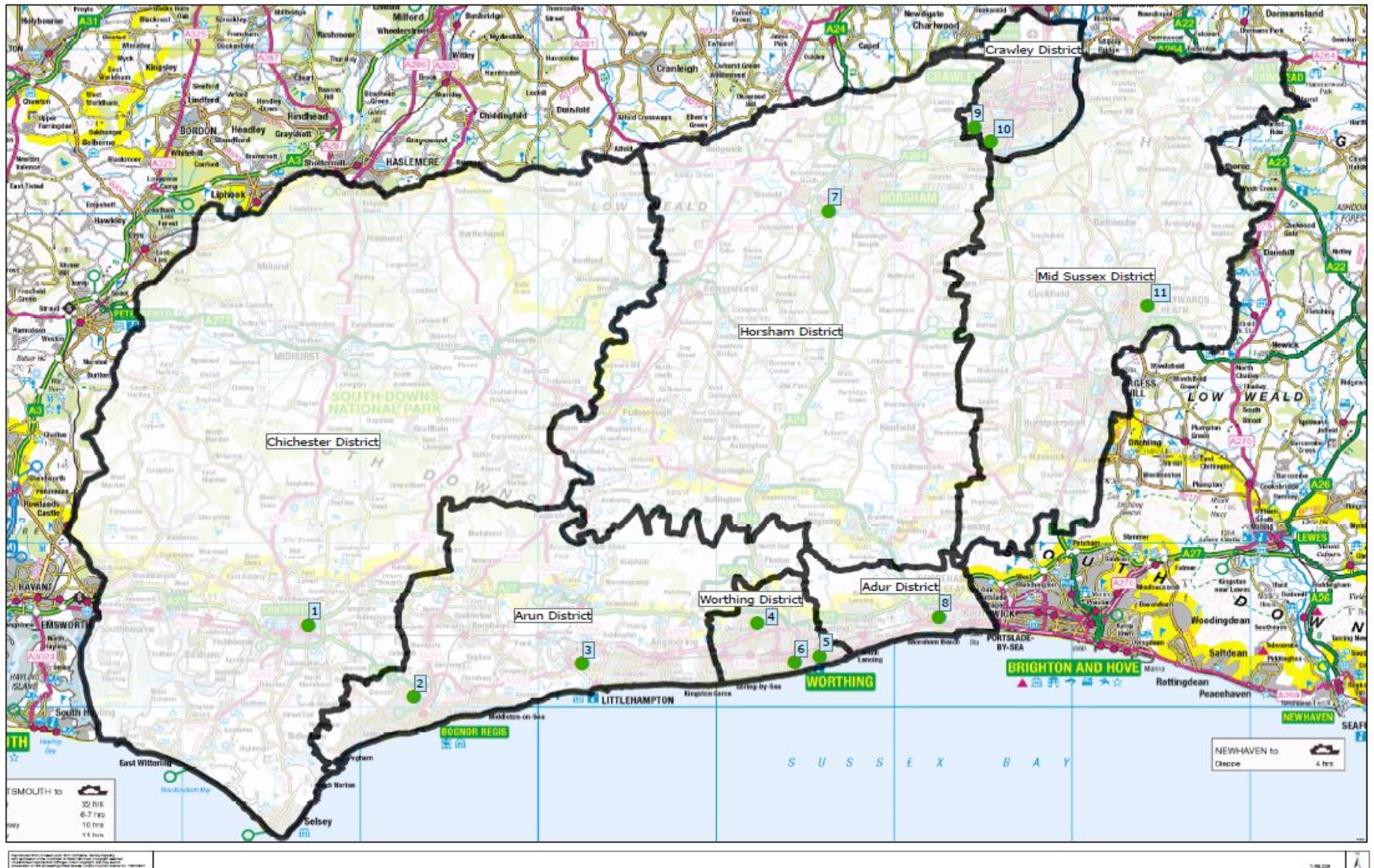
### Delivery Point Locations - Current



Numbered Index for map above

Code	Centre	Code	Centre
1	Angmering CFC	22	Maybridge CFC
2	Bewbush CFC	23	Mid Sussex Rural North
3a	Billingshurst & Pulborough CFC - Billingshurst	24	Midhurst CFC
3b	Billingshurst & Pulborough CFC - Pulborough	25	Northgate CFC
4	Bognor Nursery School CFC	26	Petworth CFC
5	Boundstone Nursery School CFC	27a	Pound Hill & Maidenbower CFC (Maidenbower)
6	Broadfield CFC	27b	Pound Hill & Maidenbower CFC (Pound Hill)
7	Chichester Nursery School CFC	28	Roffey CFC
8	Durrington CFC	29	Rural Haywards Heath
9	East Grinstead (Blackwells) CFC	30	Rural Horsham CFC
10	East Grinstead (Library) CFC	31	Rural Steyning and Henfield CFC
11	East Preston CFC	32	Selsey CFC
12	Felpham CFC	33	Sidney West CFC
13	Findon CFC	34	Southbourne CFC
14a	Footprints CFC (Crescent Road)	35	Southgate CFC
14b	Footprints CFC (Lyndhurst Rd)	36	Southwater CFC
15	Haywards Heath CFC	37	Stepping Stones CFC
16	Horsham Nursery CFC	38	Sussex Downs CFC
17	Kingston Buci CFC	39	The Gattons CFC
18	Lancing CFC	40	The Needles CFC
19	Langley Green	41	The Tree House CFC
20	Little Footsteps CFC	42	The Villages CFC
21	Littlehampton CFC (Wickboure centre)	43	The Wave CFC

# Delivery Point Locations - Proposed





Number Index for map above (proposed delivery points)

Code	Centre
1	Chichester Nursery School CFC
2	The Tree House CFC
3	Littlehampton CFC (Wickboure centre)
4	Durrington CFC
5	Worthing Library Project
6	Footprints CFC (Lyndhurst Rd)
7	The Needles CFC
8	Kingston Buci CFC
9	Bewbush CFC
10	Broadfield CFC
11	Haywards Heath CFC

